STATEMENT OF OPTIONS U.S. ARMY RESERVE, ACTIVE GUARD RESERVE (AGR) PROGRAM

For use of this form, see AR 140-111; the proponent agency is OCAR

AUTHORITY:	Section 301, title 5, USC	ONIKED BY THE P	RIVACY ACT OF 1974		
PRINCIPAL PURPOSE:	To determine and select an option after imposition of a bar to reenlistment.				
ROUTINE USES:	Information is needed to ensure that soldier?s option statement is properly recorded and identified with his or her records.				
DISCLOSURE:	Disclosure is voluntary, however, failure to furnish the information could adversely affect the soldier.				
THRU: (Include ZIP Co	de)	Personnel (9700 Page		DATE	
I WAS NOTIFIED OF MY DA BAR TO REENLISTMENT UNDER THE QUALITATIVE MANAGEMENT PROGRAM (AR 140-1110) ON					
PRINTED/TYPED NAME AN	ND RANK		SSN	ETS/REFRAD DATE	
SIGNATURE			1	DATE	

NAME	SSN				
ON I PRESENTED THE DA BAR TO REENLISTMENT, EX COUNSELED THE SOLDIER ON HIS/HER RIGHTS UNDER AR 140-111 AND AR 635-200. AS THE CO FOLLOWING OPTION AS INDICATED BY MY INITIALS AT THE BOX MARKED BELOW:					
OPTION 1 I will submit an appeal based on my determination that the soldier has overce Board or has so significantly improved his/her performance as to warrant reconsideration of the board's submitted within 90 days of the date I presented the DA Bar to Reenlistment.					
OPTION 2 This soldier has been attached to my command for less than 120 days; he/s I will submit a supplemental DA Form 8028-R indicating my decision on my options NLT		days from date of			
OPTION 3 I will not submit an appeal. Action will be taken per AR 140-111 and AR 63 selected option (above).	35-200 as necessary	based on the soldier's			
PRINTED/TYPED NAME AND RANK, AND BRANCH OF COMMANDER PRESENTING THE BAR					
SIGNATURE		DATE			